The following Coordinator manual is a comprehensive guide to GIC benefit procedures. For easy reference, please file this in a three-ring binder and keep it with your LTD Coordinator manual. If you have any additional questions about GIC benefits, log onto our website or call our Operations Department.

GIC forms are in the back of this manual. Please photocopy these as needed. Many GIC forms are also on our website.

Please keep in mind that respecting the privacy rights of employees is imperative for all GIC Coordinators. Under no circumstances are you to give or solicit personal information about your employees, even with other agencies, including law enforcement personnel, without first checking with your agency's legal counsel. Doing so is a potential violation of state and federal law.

Please remember to give all new employees and all employees at annual enrollment a GIC Benefit Decision Guide.



Group Insurance Commission
P.O. Box 8747 • Boston, MA 02114-8747
Phone: 617.727.2310
www.mass.gov/gic

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ENROLLMENT ELIGIBILITY AND EFFECTIVE DATES

Basic Life & Health, Optional Life, LTD, and GIC Dental/Vision

ELIGIBILITY

New employees eligible for GIC benefits and who work full-time or part-time hours of at least 18.75 hours per 37.5-hour workweek or 20 hours per 40-hour workweek can enroll. For employees electing the GIC Dental/Vision plan please see the Dental/Vision pages in this section for eligibility rules.

COVERAGE EFFECTIVE DATE

New employee coverage begins on the first day of the month following 60 calendar days from the first date of employment, or two calendar months, whichever comes first.

Employees who do not enroll in basic life, basic life and health, optional life, LTD and GIC Dental/Vision when first eligible (see new hire section) are subject to late enrollment and annual enrollment rules, see the corresponding section for details.

If an employee loses health insurance elsewhere, he or she can enroll in GIC coverage at any time during the year with proof of loss of other coverage. See Late Enrollment section for details.

Newly hired employees eligible for GIC's Dental/Vision Plan must satisfy the required GIC waiting period from the date of hire (see Dental/Vision pages of this section). Employees who transfer into a management or confidential position will be eligible for GIC's Dental/Vision coverage the first day of the second month following the transfer. In the case of a retroactive promotion, the GIC will determine the effective date of coverage. Employees enrolled in the GIC's Dental/Vision Plan who voluntarily withdraw from the plan or terminate for non-payment of premium will not be eligible for re-enrollment in the plan until the July 1st following 24 months from the date coverage ended.

Date of employment is from

January 2 – February 1
February 2 – March 2
March 3 – April 2
April 3 – May 2
May 3 – June 2
June 3 – July 3
July 4 – August 2
August 3 – September 2
September 3 – October 2
October 3 – November 2
November 3 – December 3
December 4 – January 1

Coverage begins on

April 1
May 1
June 1
July 1
August 1
September 1
October 1
November 1
December 1
January 1
February 1
March 1

Managed Care Features In All Health Plans

All health plans offered through the Group Insurance Commission include one or more of the following managed care features:

NETWORKS

Networks are groups of doctors, hospitals and other health care providers. Members treated by network providers usually receive the maximum level of benefits.

UTILIZATION REVIEW

With utilization review, health plan staff work with the enrollee's providers to determine what treatment the patient needs and where it is best provided. For example, an enrollee can be quite sick, but not need to be cared for in a hospital. In today's medical world, there often are hospital alternatives, such as home health care and hospice care.

CASE MANAGEMENT

With case management, health care clinicians are assigned to work with patients who have serious medical, psychiatric or substance abuse conditions that require extensive treatment or prolonged care (for example, multiple sclerosis, spinal cord injuries or AIDS). Case managers suggest and coordinate patients' treatment to enhance quality of care. Patients' families may be involved as well. The goal is to provide the best possible management of cases that present complex or long-term issues.

Choosing a Health Plan

Employees and their families can choose from an array of health plans. Each employee's needs are different, and it is important that you, the GIC Coordinator, not influence an employee's selection. What you should do is learn about the similarities and differences among the plans and where the plans are available. Recommend that the employee research his/her options and obtain the following information before making a selection.

QUESTION	RESOURCE
Is the Plan available	Benefit Decision
where the employee lives?	Guide
Is the employee	Benefit Decision
eligible to join?	Guide
Do the employee's doctors	The Plan by phone
and hospitals in the Plan?	or web site
How did the Plan rate in	GIC's Report
"quality"?	Card
How did the Plan rate	GIC's Report
in "satisfaction"?	Card
Monthly premium cost	Benefit Decision
	Guide

All GIC materials, including the Benefit Decision Guides, For Your Benefit newsletters, and Report Card are available on our web site.

BENEFIT OPTIONS

GIC HEALTH PLAN OPTIONS

See the Employee *Benefit Decision Guide* for health plan options. These are distributed immediately before annual enrollment and are on the GIC's website.

Other GIC Benefits

In addition to health care benefits, the GIC offers the following benefit programs. You and the employee should familiarize yourselves with these programs. Details are in the *Benefit Decision Guide* and on our web site:

- Long Term Disability (Be sure to include your LTD manual in the same binder as this manual.)
- ◆ Basic Life Insurance
- Optional Life Insurance
- Dependent Care Assistance Program (DCAP)
- Health Care Spending Account (HCSA)
- Dental/Vision program See eligibility rules on following page.

DENTAL/VISION

GIC Dental/Vision Eligibility

The GIC Dental/Vision Program is for employees who are not covered by collective bargaining or do not have another Dental and/or Vision Plan, primarily managers, the Legislature, its staff, and Executive Office staff. Employees of authorities, higher education, and the Judicial Trial Court system are not eligible for GIC Dental/Vision coverage.

EMPLOYEES ARE NOT ELIGIBLE IF THEY ARE:

- Subject to collective bargaining
- Employed by an Authority
- Employed by higher education
- Employed by the Judicial Trial Court system

EMPLOYEES ARE ELIGIBLE IF THEY:

- Work for the Commonwealth and are eligible for life and/or health insurance coverage provided by the GIC, and
- Are not otherwise eligible for dental and/or vision benefits pursuant to a separate appropriation; or
- Are not eligible for dental and/or vision benefits provided through the provisions of a contract; or
- Are not eligible for dental/or vision benefits provided through the provisions of a collective bargaining agreement; or
- Are not eligible for dental and/or vision benefits provided in whole or in part through employer-provided funding.

MAGIC ELEARNING

The eLearning Knowledge Center for HR/CMS agencies only, gives step by step instructions for:

- Logging into MAGIC
- Adding health, LTD, optional life and/or dental/vision coverage for new employees. (GIC dental/vision coverage is restricted to eligible employees only see page 5.)
- Withdrawing any GIC coverage
- Modifying health or GIC dental/vision coverage
- Viewing employees' family health coverage
- Viewing coverage history
- Viewing billing data
- Searching for an employee by name

To access the site, go to:

http://www.hrcms.state.ma.us/training/online/elearning_magic.htm